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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/627,869	07/28/2003	Hideo Shimada	1509.1035	3650

21171 7590 09/30/2004

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EXAMINER

PRASAD, CHANDRIKA

ART UNIT PAPER NUMBER

2839

DATE MAILED: 09/30/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

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<b>Interview Summary</b>	<b>Application No.</b>	<b>Applicant(s)</b>	
	10/627,869	SHIMADA, HIDEO	
	<b>Examiner</b>	<b>Art Unit</b>	
	Chandrika Prasad	2839	

All participants (applicant, applicant's representative, PTO personnel):

- (1) Chandrika Prasad. (3) \_\_\_\_.
- (2) Mike Badaqliacca. (4) \_\_\_\_.

Date of Interview: 28 September 2004.

Type: a) ☐ Telephonic b) ☐ Video Conference  
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.  
If Yes, brief description: \_\_\_\_.

Claim(s) discussed: \_\_\_\_.

Identification of prior art discussed: \_\_\_\_.

Agreement with respect to the claims f) ☐ was reached. g) ☐ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The applicant explained that finality of last office action mailed 8/26/04 was improper. The examiner concurs and will withdraw the finality in the next office action.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

  
\_\_\_\_\_  
Examiner's signature, if required